sfor Yes No X	eet all three tests	spouse or dependent child because they m	valincome, or liabilities of a s	EXEMPTION - Have you excluded from this report any other assets, "uneamed" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.
ided Yes No X	n be disclosed. Have you excluded	er "excepted trusts" need not be disclosed	be on Ethics and certain other Ident child?	TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need no from this report details of such a trust that benefits you, your spouse, or dependent child?
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ਜ	SWER "YES" QUIRED TO COMPLETE		RESPONDING SCHI	ATTACH THE CORRESPONDING SCHEDULE IF YOU AND THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE RE
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filing? Yes X No	ing the reporting ough the date of f	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	X	A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?
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A \$200 penalty shall be assessed against any individual who files more than 30 days late.	A \$200 penalt individual who	Period Covered: January 1, 2017 to April 15, 2018 (30 days before filing)	Staff Filer Type (If Applicable): Shared Principal Assistant	New Officer or Employee Staff File Employing Office: Shared
(Office Use Only)	W	Check if Amendment	da 18 (Primary)	New Member of or Candidate for State: Florida U.S. House of Representatives District: 27th X Candidates - Date of Election: August 28, 2018 (Primary)
U.S. HOUSE OF REPRESENTATIVES	U.S. HOUSE O	ne:	Spouse Daytime Telephone:	Name: Matthew W. Haggman
LEGISLATIVE RESOURCE CENTERS 1 of 9	LEGISLATIVE	FORM B For New Members, Candidates, and New Employees	For New Members, C	UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

Matthew W. Haggman

Page 2

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	BLOCK A Assets and/or income Sources Value of Asset Value o	BLOCKS Value of Asset Folicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please apacity the method used. Fan asset was seld during the reporting period and is included only because it generated income, the value stoud be "Norse." Column M is for assets held by your epouse or dependent child in which you have no internet.	Type of hy Check all columns that ay the generals facciones of the Faccion	For meets for white the season in the season of the season	Amount of Income Amount of In
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

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SCHEDULE A -- ASSETS & "UNEARNED INCOME

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Name:	
Matthew W. Haggman	
Page 4 of 9	

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Common Wealth Brokerage = "CW"

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**Note: During September 2017, funds from the above disclosed retirement plan assets at Fidelity. Vanguard and Northwestern Mutual(SEP IRA, IRAs and 403(h) for both candidate and spouse were transferred to a new brokerage investment company through Common Wealth Financial Network managed by Lightship Wealth Strategies, Inc.

SCHEDULE A -- ASSETS & "UNEARNED INCOMI

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Name: Matthew W. Haggman	
Page 5 of 9	

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Common Wealth Brokerage = "CW"

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**Note: During September 2017, funds from the above disclosed retirement plan assets at Fidelity, Vanguard and Northwestern Mutual(SEP IRA, IRAs and 403(b) for both candidate and spouse were transferred to a new brokerage investment company through Common Wealth Financial Network managed by Lightship Wealth Strategies, Inc.

CANDIDACY NUMBER HBFL7136

SCHEDULE A - ASSETS & "UNEARNED INCOME"

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Name: Matthew W. Haggman	
Page 6 of 9	

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Use additional sheets if more space is required.

SCHEDULE C - EARNED INCOME

Name: Matthew W. Haggman	
Page	
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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer's and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below. professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff, INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff rate was \$27,785. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, and payments for EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

			Amount
Control (Invitore date of lecelar for Houseland)	i ye	Current Year to Filing	Proceeding Year
3	Honoratus	\$0	\$500
Examples: Col War Roundiable (Od. 2)	Spouse Speech	(8)	\$1,000
John S. and James L. Knight Foundation, Inc. (to July 21, 2017)	Salary	\$ -0-	\$ 103,870
Danet Linares, P.A. (Also K-1 business income separately			
disclosed above, Schedule A)	Salary (Spouse)	\$ 30,000	\$ 140,000
			,

Use additional sheets if more space is required.

CASDIDACY SUSAGA HBFL7136

SCHEDULE D - LIABILITIES

Name: Matthew W. Haggman ∞ <u>`</u>Q Ø

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including murtgages on their personal residence. Exclude: Any mortgage on your personal residence and or are a Member); foans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibiling of you or your spouse. Report a revolving change account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

	***************************************							A	moun	Amount of Liability				1	
			Dag		>	w	n	0	m	71	ø	=	-	-	*
بر ک ^ر ه		Creditor	Liability Incurred MO/YR	Type of Liability	\$10,001- \$16,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000	\$250,001- \$500,000	\$500,001- \$1,000,000	\$1,000,001- \$5,000,000	\$5,000,001- \$25,000,000	\$25,000,001- \$50,000,000	Over \$50,000,000	Over \$1,000,000* (Spouse/DC Liability)
	Example	First Bank of Willnington, DE	5.798	Mortgage on Rental Property, Dover, DE				×							
	Vermo	Vermont Student Assistance Corporation	7/97	Law School Student Loan 1		×								_	
	Vermo	Vermont Student Assistance Corporation	7/97	Law School Student Loan 2	×										
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SCHE	DUE	SCHEDULE E - POSITIONS								l		l	L		l

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Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting First-year candidates and new employees report positions held in the current calendar year and two previous years.

Use additional sheets if more space is required.

SCHEDULEF

CANDIDACY NUMBER HB FL 7136

achabb	SCORDOLE T - AGKERMENIS	Name: Matthew W. Haggman	Page 9 of 9
identify the dr continuation of employer.	identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a k continuation or defenal of payments by a former or current employer other than the U.S. government; or continuing participation in an employer.	n respect to: future employment; a leave of absence during the period of government service; not, or continuing participation in an employee welfare or benefit plan maintained by a former	if government service; sintained by a former
Date	Parties to Agreement	Terms of Agreement	
	-N/A -		
			AT A THE REAL PROPERTY OF THE

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information tisted on Schedule C.

Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hornetown, Homestate	Anny anting Service
- N/A -	

Use additional sheets if more space is required.